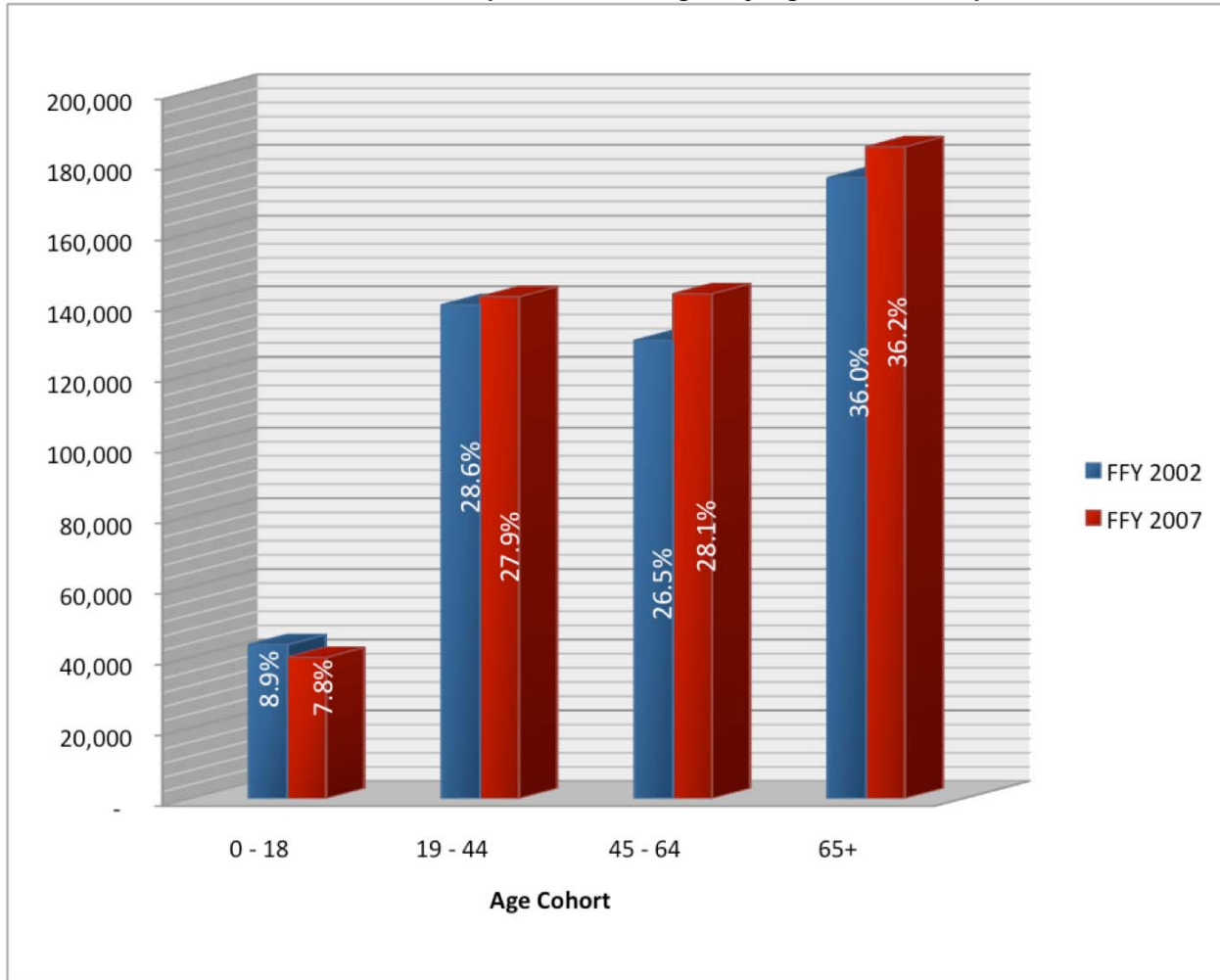


Hospital Discharge Summary, Oct 2006 – Sept 2007

Inpatient discharges (excluding newborns) from South Carolina Acute Care Hospitals have increased by 4.2 % since FFY 2002. The largest increase was seen in the 45 – 64 age cohort; this increase correlates directly with the population shift of the state. The percent distribution by age cohort has remained fairly consistent over time. (Figure1).

Figure 1
SC Non-newborn Inpatient Discharges by Age Cohort Comparison



Age Cohort	FFY 2002	FFY 2007
0 - 18	43,549	39,915
19 - 44	139,684	141,992
45 - 64	129,604	142,841
65+	175,644	184,398

The percent distribution by primary expected pay source remained fairly constant over the five years with the exception of the percent of self pay/indigent which has shown an increase. (Table 1)

Table 1
Percent Distribution of SC Non-newborn Inpatient Discharges by Primary Expected Pay Source

Primary Expected Pay Source	FFY 2002	FFY 2007
Insurance	33.3%	32.1%
Medicaid	16.5%	16.8%
Medicare	42.9%	42.5%
Self Pay/Indigent	6.9%	8.6%

Figure 2
SC Non-newborn Inpatient Average Charges by Primary Expected Pay Source

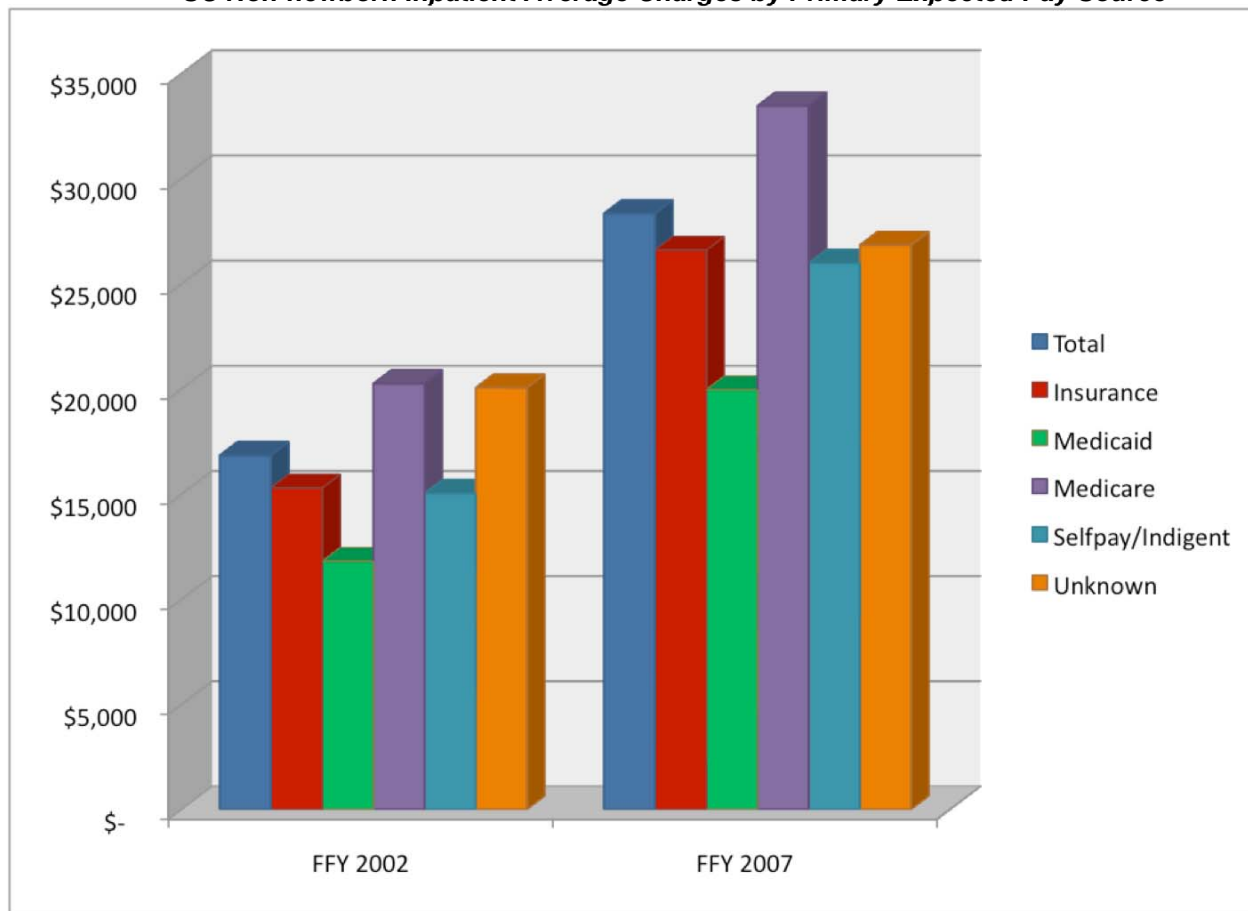


Table 2
SC Non-newborn Inpatient Discharges by Primary Expected Pay Source

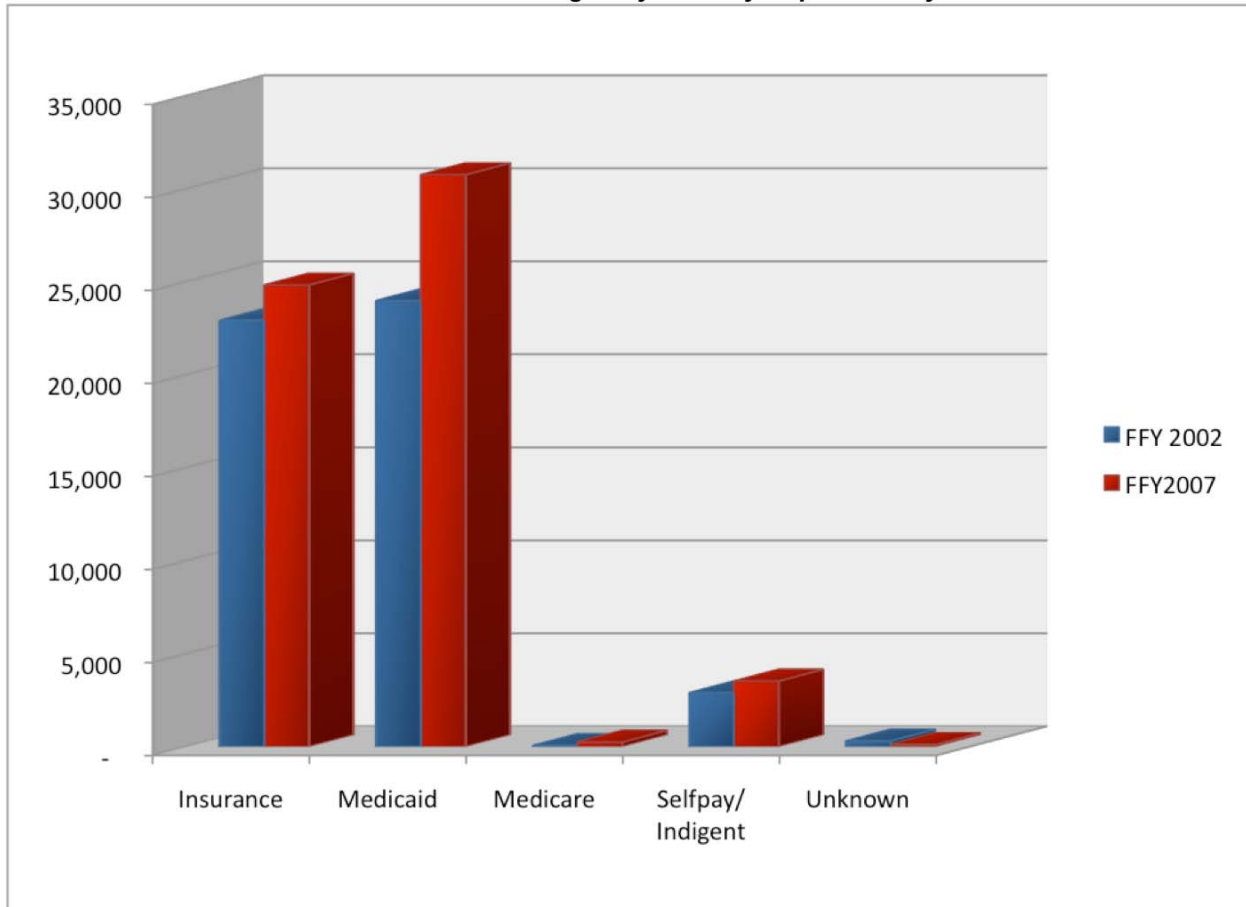
Primary Expected Pay Source	FFY 2002				FFY 2007			
	Discharges	Ave. Charge	ALOS	Ave. Severity	Discharges	Ave. Charge	ALOS	Ave. Severity
Total	488,481	\$16,853	5.0	1.8	509,146	\$28,351	5.1	2.0
Insurance	162,554	\$15,296	3.8	1.6	163,444	\$26,600	4.0	1.7
Medicaid	80,766	\$11,811	4.3	1.7	85,434	\$19,962	4.6	1.7
Medicare	209,588	\$20,262	6.2	2.1	216,219	\$33,470	6.2	2.3
Self Pay/Indigent	33,478	\$15,041	4.4	1.7	43,693	\$25,989	4.8	1.9
Unknown	2,095	\$20,066	3.1	1.6	356	\$26,849	5.4	1.9

Newborn discharges from South Carolina Acute Care Hospitals have increased by approximately 19% since FFY 2002. The primary expected pay source with the largest increase was Medicaid at 28%. The percent distribution by age cohort has shifted slightly from private insurance to Medicaid over the time period (Table 3).

Table 3
Percent Distribution of SC Newborn Discharges by Primary Expected Pay Source

Primary Expected Pay Source	FFY 2002 Pct of Total	FFY 2007 Pct of Total
Insurance	45.7%	41.7%
Medicaid	47.8%	51.7%
Medicare	0.1%	0.4%
Self Pay/Indigent	5.8%	5.9%
Unknown	0.6%	0.2%

Figure 3
SC Newborn Discharges by Primary Expected Pay Source



Primary Expected Pay Source	FFY 2002	FFY2007
Insurance	22,916	24,819
Medicaid	23,978	30,747
Medicare	57	242
Self Pay/ Indigent	2,900	3,531
Unknown	304	110

Table 4
SC Newborn Discharges by Primary Expected Pay Source, FFY 2007

Primary Expected Pay Source	Discharges	Total Charges	Ave. Charge	ALOS
Total	59,449	\$449,318,838	\$7,558	3.4
Insurance	24,819	\$166,558,319	\$6,711	3.2
Medicaid	30,747	\$267,264,136	\$8,692	3.7
Medicare	242	\$665,845	\$2,751	2.3
Self Pay/Indigent	3,531	\$14,428,938	\$4,086	2.7
Unknown	110	\$401,601	\$3,651	2.8

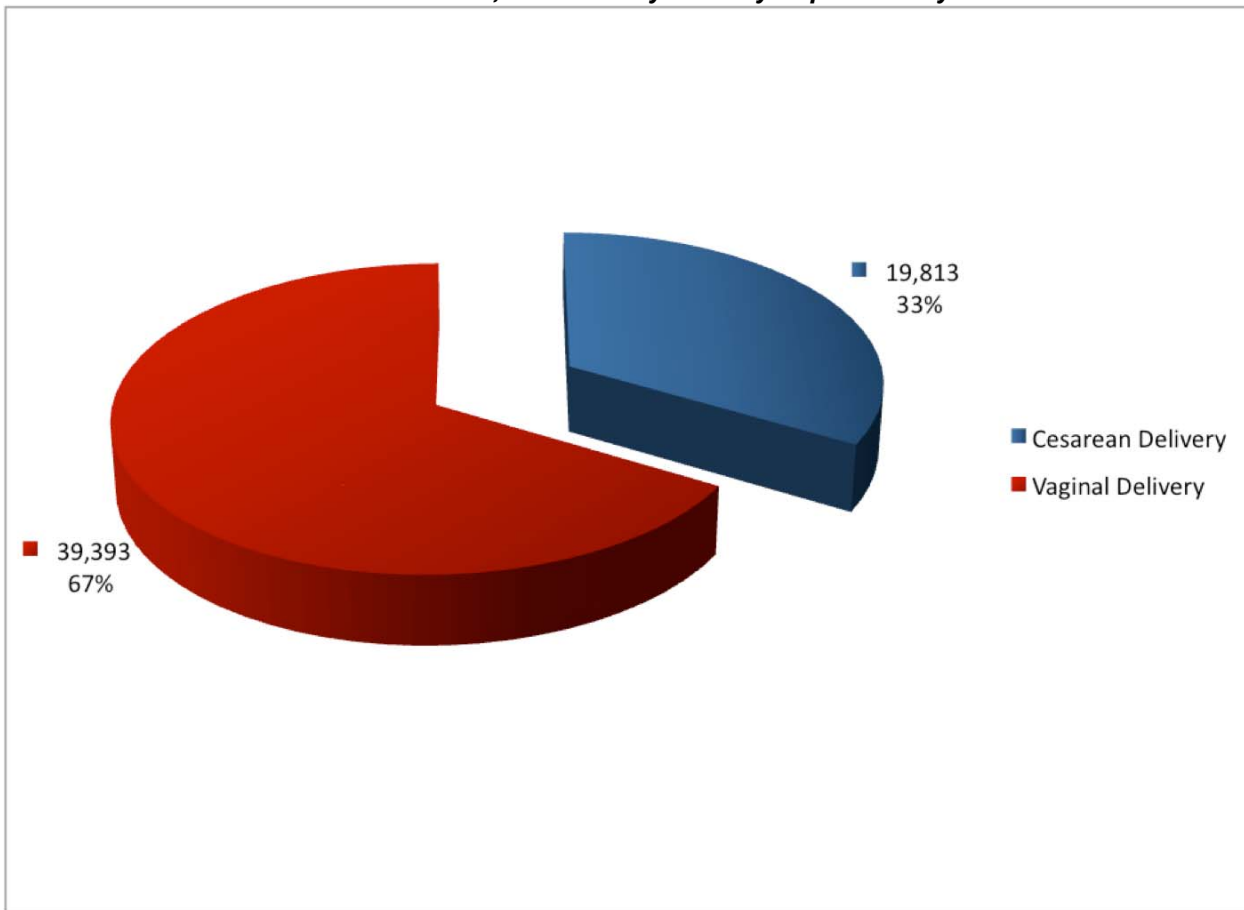
Women were hospitalized more often than men, but the average severity and length of stay were slightly higher for men (*Table 5*). Deliveries account for approximately 19% of hospitalizations for women. In FFY 2007, 39,393 (67%) were vaginal deliveries and 19,813 (33%) were cesarean deliveries (*Figure 4*).

Table 5
SC Non-newborn Inpatient Discharges by Gender, FFY07

Gender	Discharges	Pct of Total	ALOS	Ave. Severity
Female	309,305	60.7%	4.8	1.9
Male	199,769	39.2%	5.6	2.1
Total	509,146	100.0%	5.1	2.0

Note: Numbers may not add due to unknowns

Figure 4
Deliveries in SC, FFY 2007 by Primary Expected Pay Source



Women are hospitalized in South Carolina most often for childbirth. Heart failure, psychoses and COPD are also among the top ten reasons and generally require longer stays. Pneumonia/pleurisy is the most severe diagnoses; psychoses required the longest average length of stay (*Table 6*).

Table 6
Top Ten Reasons for SC Inpatient Discharges for Women, FFY 2007 (excludes newborns)

Rank	DRG	Description	Discharges	Pct of Total	ALOS	Ave. Severity
1	373	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	31,047	10.0%	2.2	1.3
2	371	CESAREAN SECTION W/O CC	14,302	4.6%	3.1	1.3
3	359	UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	7,970	2.6%	2.0	1.1
4	544	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY	7,901	2.6%	4.4	1.9
5	127	HEART FAILURE & SHOCK	7,541	2.4%	5.4	2.3
6	89	SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	6,394	2.1%	5.7	2.4
7	430	PSYCHOSES	5,799	1.9%	9.7	1.8
8	88	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	5,735	1.9%	5.1	2.1
9	370	CESAREAN SECTION W CC	5,511	1.8%	3.9	1.8
10	182	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	5,361	1.7%	4.2	2.1

Men are hospitalized in South Carolina most often for heart failure. Pneumonia/pleurisy, renal failure, COPD and psychoses are also among the top ten reasons. Hospitalizations for psychoses create the longest length of stay, averaging at slightly over ten days. (*Table 7*)

Table 7
Top Ten Reasons for SC Inpatient Discharges for Men, FFY 2007(excludes newborns)

Rank	DRG	Description	Discharges	Pct of Total	ALOS	Ave. Severity
1	127	HEART FAILURE & SHOCK	6,782	3.4%	5.1	2.3
2	89	SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	5,124	2.6%	5.3	2.4
3	544	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY	4,582	2.3%	4.1	2.0
4	316	RENAL FAILURE	4,128	2.1%	6.3	2.9
5	88	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	4,056	2.0%	4.6	2.1
6	430	PSYCHOSES	4,041	2.0%	10.1	1.7
7	143	CHEST PAIN	3,925	2.0%	1.8	1.6
8	14	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION	3,470	1.7%	6.4	2.3
9	558	PERCUTANEOUS CARDIOVASCULAR PROC W DRUG-ELUTING STENT W/O MAJ CV DX	3,422	1.7%	1.6	1.3
10	576	SEPTICEMIA W/O MV 96+ HOURS AGE >17	3,249	1.6%	7.7	3.0